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CONFIRMATION NO. 7566

<b>SERIAL NUMBER</b> 10/568,415	<b>FILING OR 371(c) DATE</b> 02/14/2006 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3709	<b>ATTORNEY DOCKET NO.</b> 06008
<b>APPLICANTS</b> Piero Petrini, Perugia, ITALY; Guy Deneuvillers, Merlimont, FRANCE, <i>Xm</i>				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IT04/00148 03/24/2004 <i>Xm</i>				
<b>** FOREIGN APPLICATIONS *****</b> ITALY FI2003 A 000084 03/28/2003 <i>X13</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 08/05/2006 <b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Xm</i> Examiner's Signature <i>Xm</i> Initials <i>Xm</i>		<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 16
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 23338				
<b>TITLE</b> Interlaminar vertebral prosthesis				
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	